

ATTACHMENT

05/13/2006 12:14 8143636822

FCI MCKEAN

PAGE 02

U.S. DEPARTMENT OF JUSTICE
Federal Bureau of PrisonsWARDEN'S OFFICE
FCI, MCKEAN, PA.

REQUEST FOR ADMINISTRATIVE REMEDY

Type or use ball-point pen. If attachments are needed, submit four copies. Additional instructions on reverse.

in: JUAN-DAVILA BAJANA	47580-053	BA	MCKEAN
LAST NAME, FIRST, MIDDLE INITIAL	REG. NO.	UNIT	INSTITUTION

Part A- INMATE REQUEST

SEE ATTACHED

4/22/03

DATE

Part B- RESPONSE

SIGNATURE OF REQUESTER

With drawn

4/26/03

DATE

WARDEN OR REGIONAL DIRECTOR

If dissatisfied with this response, you may appeal to the Regional Director. Your appeal must be received in the Regional Office within 20 calendar days of the date of this response.

ORIGINAL: RETURN TO INMATE

CASE NUMBER: 297804

C- RECEIPT

CASE NUMBER:

Return to:	LAST NAME, FIRST, MIDDLE INITIAL	REG. NO.	UNIT	INSTITUTION
------------	----------------------------------	----------	------	-------------

SUBJECT:

DATE

RECIPIENT'S SIGNATURE (STAFF MEMBER)

USP LVN



Printed on Recycled Paper

BP-229(13)
APR 2004

05/19/2006 12:14

8143636822

FCI MCKEAN

PAGE 04

MCK 1330.
Attachment**ADMINISTRATIVE REMEDY INFORMAL RESOLUTION WORKSHEET**

PART 1: NOTICE TO INMATE: Be advised that before filing a Request for Administrative Remedy Form BP-9, you **MUST** attempt to informally resolve your complaint through your Correctional Counselor. Briefly state complaint below, and list what efforts you have made to resolve your complaint informally, stating names of staff contacted.

This Informal Resolution was issued by the Correctional Counselor on _____ and returned to the Counselor on _____ (date). (date)

Inmate's Name JUAN-DAVILA BAJANA Number: 47580-053 Unit _____

1. Complaint: _____

PLEASE SEE ATTACHED

2. Specific relief desired: _____

SEE ATTACHED

3. Efforts made to informally resolve and staff contacted: _____

SOI UNICOR


Inmate's Signature

DATED

4/8/03

47580-053

Inmate's Register Number

PART 2: CORRECTIONAL COUNSELOR'S COMMENTS:

1. Efforts made to informally resolve and names of staff contacted: _____

~~BASED ON INSTITUTION SUPPLEMENT 8125.1, THE SOI HAS THE RIGHT TO REMOVE ANY INMATE FROM UNICOR WHO IS TO BELIEVED TO BE VIOLATING RULES, SAFETY VIOLATIONS, OR UNSATISFACTORY WORK PERFORMANCE. *****~~

Date informally resolved 6/2/03 BP-9 issued (circle one): _____
Counselor's Signature: T. HOLT, COUNSELOR UNIT BA 4-18-2003

If complaint is NOT informally resolved, forward original attached to BP-229 form to Warden (Attn: Warden's Secretary).

ADMINISTRATIVE REMEDY AGAINST UNICOR GENERAL FOREMAN, MR. ENGLISH

I have repeatedly complained to UNICOR evening shift staff of secondhand smoke (ETS), in the factory. I have repeatedly requested that smoking be limited only to the break area and at break time because evidence of smoking is noticeable all over the factory particularly on my work area. UNICOR ETS level, has repeatedly caused and continuing to cause me shortness of breath, sinusitis, lightheadedness, watery-eyes and occasional vomiting.

In retaliation for complaining about UNICOR staff deliberate indifference to my serious health concern, I was told on 3/12/03, by Mr. English, that I will no longer work for him, I should grab my coat with other two inmates that were also complaining about the ETS level in UNICOR, and return to our housing units. I asked Mr. English what was the reason(s) for firing me from night shift UNICOR?. Mr. English told me that I am lucky I still have a job. Mr. English told me and the two other inmates, that we are not being fired, but we are being transfer to day shift.

Ironically, instead of being transfer to day-shift as Mr. English told me, my name was on the "Change Sheet" on 3/28/03, as "unassign" effective 3/31/03.

RELIEF REQUESTED:

I want to be reinstated to my UNICOR night-shift job because terminating me in retaliation for complaining about the ETS is unconstitutional.